

PLANNING DEPARTMENT

ABBREVIATED DEVELOPMENT PLAN REVIEW

SUPPLEMENTAL APPLICATION FORM

TOWN OF HILTON HEAD ISLAND

THIS FORM MUST BE ACCOMPANIED BY A MASTER APPLICATION FORM.

Please TYPE or PRINT legibly

NAME OF DEVELOPMENT _____

GROSS ACREAGE OF SITE _____ N ET ACREAGE OF SITE _____

THIS APPLICATION IS *ONLY* TO BE USED FOR FAMILY HOUSING DEVELOPMENTS

NUMBER OF HOMES CURRENTLY ON PARCEL: _____

NUMBER OF HOMES PROPOSED TO BE ON PARCEL: _____

THE FOLLOWING ITEMS MUST BE ATTACHED IN ORDER FOR THIS APPLICATION TO BE COMPLETE. SEE LMO 16-3-311 FOR MORE INFORMATION AND POSSIBLE ADDITIONAL ITEMS REQUIRED TO BE SUBMITTED PRIOR TO APPROVAL

- ☐ PROOF OF OWNERSHIP (property deed, title, or tax receipt)
- ☐ CERTIFICATION OF OWNER(S) CONSENT
- ☐ PROOF OF AN APPROVED SEWAGE DISPOSAL SYSTEM FOR EACH HOME
- ☐ WRITTEN NARRATIVE
- ☐ SITE PLAN (4 copies, black line, see Sec 16-3-311-A-1 for information required)
- ☐ COPY OF ENCROACHMENT PERMIT IF NEEDED
- ☐ COPY OF DRAFT LEGAL DOCUMENTS IF NEEDED (access easement, etc)
- ☐ FILING FEE (\$50 + \$7 per new home)

FOR OFFICIAL USE ONLY

DATE RECEIVED: _____

TIME: _____

ACCEPTED BY: _____

MASTER TRACKING NO. _____